

Department of Labor and Industries
Asbestos Certification Program
PO Box 44614
Olympia, WA 98504-4614



Application for Replacement of Lost or Stolen Asbestos Certification Card

Please **PRINT IN INK** or **TYPE**. Please return to ASBESTOS CERTIFICATION PROGRAM with the \$25.00 fee.

Application for a replacement of a: Supervisors card ☐ Worker card ☐

Name (last, first, middle initial)		Certification No.	
Address		Social Security No. (for ID only)	
City		State	ZIP+4
Home phone number		Work phone number	Birthdate
Hair color	Eye color	Height	Weight
Has your name change? What was it previously?			
Reason for request			

This application can only be used to apply for a replacement card for a lost or stolen card. The replacement card will make the old card void.

Instruction for mailing - please include the \$25 fee and send to:

Department of Labor and Industries
Asbestos Certification Program
PO Box 44614
Olympia WA 98504-4614

Or:

You may take this application and the fee to your nearest L & I Service Location

I hereby certify that the statements on this application are true and accurate to the best of my knowledge. (See Chapter 18.106 Revised Code of Washington (RCW) for false statement or material misrepresentations.)

Date	Applicant's signature in ink
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L&I use only
Check #
Date mailed